

# 2016-2017 OFFLINE PERMISSION FORM



**TEAM ADVISOR:** Please give this Offline Registration Form to the parent/guardian whose name you provided during your online registration. If you need to update this information, you can log in at the Math Video Challenge website (<http://videochallenge.mathcounts.org>) and make any necessary changes online. *Do not give this form to any parents/guardians who have completed or will complete the online permission form.*

**PARENT/GUARDIAN:** As soon as possible, please complete this Offline Registration Form and email it to [videochallenge@mathcounts.org](mailto:videochallenge@mathcounts.org) or mail it to MATHCOUNTS – Math Video Challenge Registrations, 1420 King Street, Alexandria, VA 22314. *Your child cannot participate in the Math Video Challenge without your permission.*

## TEAM INFORMATION:

**!** *If your son/daughter is participating in more than one Math Video Challenge team, please write the names of all teams and team advisors on this form.*

(\*required information)

Team Advisor Name\* \_\_\_\_\_

Team Name\* \_\_\_\_\_

## STUDENT INFORMATION:

**!** *If you have more than one child participating in the Math Video Challenge this year, you must complete a separate permission form for each child.*

(\*required information)

First & Last Name\* \_\_\_\_\_ Grade Level (circle one)\* 6 7 8

Email Address \_\_\_\_\_

Name of Student's Official School of Record\* \_\_\_\_\_

School City\* \_\_\_\_\_ School State\* \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION:

(\*required information)

First & Last Name\* \_\_\_\_\_ Phone Number\* \_\_\_\_\_

Email Address \_\_\_\_\_

By signing below I attest that I am the parent/guardian of the above-mentioned minor and give permission for my child to participate in the Math Video Challenge video contest. My child and I agree to be bound by the terms and conditions of participation.

*A copy of the terms and conditions of participation can be found at <http://videochallenge.mathcounts.org/rules> or can be requested by emailing [videochallenge@mathcounts.org](mailto:videochallenge@mathcounts.org) or mailing a self-addressed stamped envelope to: MATHCOUNTS – Math Video Challenge Rules, 1420 King Street, Alexandria, VA 22314. Please direct any questions to MATHCOUNTS at [videochallenge@mathcounts.org](mailto:videochallenge@mathcounts.org) or (703) 299-9006.*

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date